

COMMONWEALTH OF MASSACHUSETTS

SUFFOLK, ss.

**Building Code Appeals Board
Docket No. 08-618**

Dana Farber Cancer Institute,)
Appellant)
v.)
City of Boston,)
Appellee)

BOARD'S RULING ON APPEAL

Procedural History

This matter came before the State Building Code Appeals Board ("Board") on Appellant's appeal filed pursuant to 780 CMR 122.1. In accordance with 780 CMR 122.3, Appellant asks the Board to grant a variance from 780 CMR 917.9.1 of the 6th Edition of the Massachusetts State Building Code ("Code").

By letter dated May 9, 2008, Thomas O'Donnell, on behalf of the Inspection Services Department for the City of Boston ("Appellee"), denied Appellant's application to replace existing fire alarm system at the 35 Binney Street, Boston facility (the "Jimmy Fund Building") because the proposed application for a new voice alarm system would violate 780 CMR 917.9.1

In accordance with G. L. c. 30A, §§10 and 11; G. L. c. 143, §100; 801 CMR 1.02 et. seq.; and 780 CMR 122.3.4, the Board convened a public hearing on August 28, 2008 where all interested parties were provided with an opportunity to testify and present evidence to the Board.

Derrick Morse, Allen Croteau, John Burke, and Mark Avery appeared at the hearing.

Material Received by the Board

State Building Code Appeals Board Appeal Application, dated June 20, 2008, signed by Derrick J. Morse, representing Appellant;

Letter dated May 9, 2008 from Boston Inspectional Services Department to Compass Electric Construction, David St. Onge, regarding 780 CMR 917.9.1;

Appeal Justification memorandum from Derrick J. Morse, P.E. to State Building Code Appeals Board, regarding Dana-Farber Cancer Institute's Jimmy Fund Building;

Fire Protection Design Narrative, dated May 27, 2008, prepared by Syska Hennessy Group, Inc. for the Dana Farber Cancer Institute;

Copy of floor plan for JF1 Floor of Jimmy Fund Building.

Discussion

Appellant wishes to change the text of the voice alarm required under section 917.9.1 only in the patient treatment area of the Jimmy Fund Building. The result would be a type of "private" notification to the staff who must react, while patients who might not be ambulatory and/or might not be able to react, are not directly notified by the voice alarm system.

For example, patients in this part of the facility may be connected with an infusion treatment, and cannot, without a nurse's assistance, "unplug" themselves from the equipment in case of an emergency. A general voice alarm could cause panic among the patients, thus putting undue stress on the staff to get the patients safely moved. The private system would first alert the health professionals.

The proposed text for the voice alarm in the patient treatment area will alert the staff. The text of the voice alarm in the other parts of the facility would continue to fully comply with 917.9.1. Both NFPA 72 (2002 edition) and NFPA 101 (2006 edition) allow the use of such "private" alarm systems.

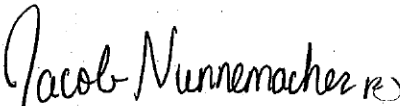
Decision

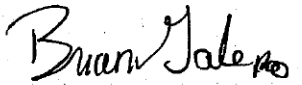
Following testimony, and based upon relevant information provided, Board members considered the following motion. The Chair entertained a motion to grant the variance from 780 CMR 917.9.1 based on the hardship and life safety issues and on the condition that the City of Boston Fire Department has thirty (30) days to provide any opposition to the variance. ("Motion"). The Board voted to allow the Motion, as described on the record. The Board voted as indicated below.


X.....Granted with conditions

The vote was:

X.....Unanimous


Jacob Nunnemacher


Brian Gale – Chair


Alexander MacLeod